

OFFICIAL

STATE CONNECTICUT

Attachment 3.1-A - Amount, Duration, and Scope
of services Provided

Categorically Needy Group(s)

TN # 84-56
SUPERSEDES
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 MARCH 1987 Page 1
 OMB No.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: CONNECTICUT

CASE MANAGEMENT SERVICES

A. Target Group:

Recipients with mental retardation as defined in the General Statutes of Connecticut, Section 1-1g and to recipients with mental retardation or conditions related to mental retardation as defined in subsection (e)(7)(ii) of Section 1919 of the Social Security Act. Recipients receiving case management services under a 1915(c) waiver will not receive targeted case management services.

B. Areas of state in which services will be provided:

/XX/ Entire State

/ Only in the following geographic areas. Authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services:

/ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

/XX/ Services are not comparable in amount, duration and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Case Management services means a continuum of supportive activities, systematically carried out by an individual case manager, that are available to assist and enable a recipient to gain access to needed medical, social, educational, or other services.

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SUPPLEMENT 1 TO ATTACHMENT 3.1-A(2)
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OMB No.: 0939-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: CONNECTICUT

CASE MANAGEMENT SERVICES

A. Target Group:

Recipients with chronic mental illness as defined in Subsection (g), Section 1915 of the Social Security Act who are part of the target population as defined by the Department of Mental Health (DMH) and amended from time to time.

B. Areas of state in which services will be provided:

/XX/ Entire State

/ Only in the following geographic areas. Authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services:

/ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

/XX/ Services are not comparable in amount, duration and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Case Management services mean the "continuum of assessment, planning, linkage, support and advocacy activities systematically carried out by an individual case manager that are available to assist and enable a recipient to gain access to needed medical, clinical, social, educational or other services."

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: CONNECTICUT

CASE MANAGEMENT SERVICES

Separate payment for case management services will not be available when the same case management service is provided as an integral and inseparable part of another Connecticut Medical Assistance Program covered service or included as part of a Medicaid funded service, including but not limited to the following: outpatient clinic services, inpatient services, substance abuse treatment services, psychiatric/psychological evaluation, individual therapy, group therapy, or family therapy.

Case management services will be reimbursable when documentation of compliance with the following requirements is on file with DMH or its performing providers:

- (1) A written plan of services developed by the case manager at least annually with the eligible person and/or their representative(s) to address identified needs; and
- (2) A permanent service record containing the eligible person's name, address and other relevant information including signed monthly service entries indicating the date(s), place of service and type(s) of case management services rendered.

E. Qualification of Providers:

The State of Connecticut Department of Mental Health and its subcontractors shall be the sole entity enrolled to provide services through the use of Connecticut's provider agreement which assures federal and state regulatory compliance.

Qualified case managers shall include individuals employed by DMH who are State of Connecticut employees or employees of an agency receiving a grant from DMH to provide case management services and are recognized by DMH as qualified to provide such services.

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State/Territory: CONNECTICUT

CASE MANAGEMENT SERVICES

F. Freedom of Choice:

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Non-Duplication of Payments:

Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: CONNECTICUT

CASE MANAGEMENT SERVICES

A. **Target Group:** Recipients of Birth to Three diagnostic and/or treatment services, in accordance with Part H of the Individuals with Disabilities Education Act (IDEA), as defined in the General Statutes of Connecticut, Section 10-76, and amended from time to time.

B. **Areas of state in which services will be provided:**

☒ Entire State

☐ Only in the following geographic areas. Authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide.

C. **Comparability of Services:**

☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. **Definition of Services:** Case management services mean the continuum of assessment, evaluation, planning, linkage, support and advocacy carried out by an individual case manager, that are available to assist and enable a recipient to gain access to needed medical, social, educational or other services. Appropriate documentation, in accordance with Part H and Medicaid requirements, will be maintained including written plan(s) of care, revised at least semiannual and more frequently if the child's condition warrants it, and a permanent service record with service entries indicating the date(s) of case management services rendered.

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SUPPLEMENT 1 TO ATTACHMENT 3.1-A(3)
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E. Qualification of Providers: The Connecticut State Department of Education shall designate Regional Family Service Coordination Centers (RFSCCs) to provide case management services through Connecticut's Medicaid Provider Agreement which assures federal and state regulatory compliance. Qualified service coordinators will be employed by the RFSCCs as case managers.

F. Freedom of Choice: The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902F(a)F(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Non-Duplication of Payments: Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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